

## Application Data Sheet

### Application Information

Application number:: Not yet assigned  
Filing Date:: Herewith  
Application Type:: Regular  
Subject Matter:: Utility  
CD-ROM or CD-R?:: None  
Title:: Anastomotic Leg Arrangement  
Attorney Docket Number:: 088/04467  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 5A  
Total Drawing Sheets:: 23  
Small Entity?:: Yes  
Petition included?:: No  
Secrecy Order in Parent Appl.?:: No

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full capacity  
Given Name:: Amir  
Family Name:: Loshakove  
City of Residence:: Moshav-Bazra 工 L X  
Country of Residence:: Israel  
Street of mailing address:: PO Box 378  
City of mailing address:: Moshav-Bazra  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 60944

**2 - ∞**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full capacity  
Given Name:: Ofer  
Family Name:: Nativ  
City of Residence:: Rishon-Lezion የ��ן  
Country of Residence:: Israel  
Street of mailing address:: 11 Hamaayan Street  
City of mailing address:: Rishon-Lezion  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 75210

**3 - ∞**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full capacity  
Given Name:: Ido  
Family Name:: Kilemnik  
City of Residence:: Herzelia የወን  
Country of Residence:: Israel  
Street of mailing address:: 35 Nordau Street  
City of mailing address:: Herzlia  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 46585

**4 - ∞**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full capacity  
Given Name:: Gil  
Family Name:: Hefer  
City of Residence:: Kfar-Saba የመብ  
Country of Residence:: Israel

Street of mailing address:: 8/8 Herzfeld Street  
City of mailing address:: Kfar Saba  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 44415

### Correspondence Information

Correspondence Customer Number :: 44909

### Representative Information

Representative Customer Number::	44909	
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### Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/IL2003/000769	09/25/03
PCT/IL2003/000769	Continuation-in-part of	10/809,274	03/25/04
10/809,274	Continuation of	PCT/IL2002/000790	09/25/02
PCT/IL2002/000790	An application claiming the benefit under 35 USC 119(e)	60/426,013	11/14/02

## **Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
WO (World Intellectual Property Organization)	PCT/IL2002/000790	09/25/02	Yes

## **Assignee Information**

Assignee name:: By-Pass, Inc.  
Street of mailing address:: 40 Ramland Road  
City of mailing address:: Orangeburg  
State or Province of mailing address:: NY  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 10962